



Farmersville Unified School District

Incident & Accident Report

Site _____

Date / Time of Incident _____

- Trespass
- Broke into school building(s)
- Theft of _____

- Fire
- Vandalism
- False Fire Alarm
- Other _____

Incident Description (location, itemization, suspects, witnesses, etc.)

Cost (repair / replace) associated with above \$ _____

Signature of Person Completing Form

Date

- Crime Report Submitted
- Police Notified
- Others Notified (parents, MOT, etc.)